- NO.CK

Date of Notification (1) ,		Name	of Building Own	ner/Oper	ator (2)	١		-			
7/10/15		P	ucke	YE	F	ARTA	JERS -	216			
Agencies Notified Type Notification			Address	1		- 0	7				
☐ EPA ☐ Initial	Q.		380	181	HU E	ER	RD.				_
DEP Amended	1	City,	State, Zip Code	1 A	,	3 . 61	7 10		9		
DOL Amendment #_ Emergency (inc		1	ERTH	H	m /	30 4 1U	J 08	ober	5	2071	-
DOH justification)		100	of Contact	- P	, 1.	, .	Table 19th	iibai	- 5	0 0	50
DCA Cancellation			CILITY INFOR	MATION	114						-
Name of Facility Where Abatement is Taking F	Place (3)	FA	CILIT INFOR	MATION	Ту	pe of Facility (4)				
	(-)					School (K-12)				
Street Address						Subchapter 8	Other than K-12	2)			
1200 STATE S	TTP.	FF	7		[E	Other (i.e. pr etc.)	ivate & commerci	al build	ings, i	nomes	s,
City (5) A	3/100	- 6- 6			Sc	quare Feet	# of Floors	Bl	dg. Ag	je	
PESTU AMA	av	A) =	r			NA	PA	1	J/.	A	
County (6)	1		ty Code (7)		Ci	1 1 1	r if being demolish	ned)			
MINDLESEX		(STAT	E USE ONLY)		-		NA				
Name of Monitoring Firm Hired by Building Ov	vner (8)	119 (5) (2) (5)	CM No.			Abatement Con					
Environmental Tactics		00	45 .		JNIQU	E SYSTEMS	OF AMERICA	4 -	count		
Street Address				100000	treet Ad		\ /F				
64 Broad St						HITEHEAD A	VE				
City, State, Zip Code						e, Zip Code HRIVER, NJ	08883		Ψ.		
Matawan, NJ 07747		7 = :			3			le .			
Project Manager for Monitoring Firm			hone No. -290-2217		elephon	e No. 2-8350	License N	10.			
Tom Geiger						OSHA Monitor					
Start Date (10) 6/30/15	Scheduled C	ompleti	on Date (11)				OF AMERIC	Α .			**
Occupancy Status During Abatement (Check	Only One)	10	8	1	Street Ad						•
Facility Closed/Vacated During Entire Pe	eriod of Abat	tement			Contract Contract	HITEHEAD A	AVE.			8	-
Abatement Performed Outside of Norma	I Facility Ho	urs				e, Zip Code	00000				
Other - Describe: OUTSIBE				- 3	SOUT	H RIVER, NJ	08882				
Scope of Work (Check All That Apply)					-						
≥3 sf or ≥3 lf		ovation .			H	Full Containme Mini-Enclosure	ent with Negative	Pressu	re		
≥160 sf or ≥260 lf	∐ Dem	olition			X	Glovebag Prod	cedure				
*						Non-Exempted	(*) and Non-Fria	ble Pro			
	Is Lo	cation							Abate	ement pe	t
Location of		mally lolely by	ye as w	Descr	ription of			-	1		Г
Asbestos-Containing Material (ACM)		enance/	ASDESIO	s Contair	ning Mat	erial (ACM) rsulation,	Amount (Specify	R	_	Enc	Ш
TO BE ABATED In Facility		al Staff?	, (i.e. u		ig, VAT,		SF or LF)	Remova	Repair	aps	Enclosure
(13)	(1	12)		other mis	cellaneo	ous)		oval	ar	Encapsulate	sure
	Yes N	lo N	/A							0	
4 1 4		<	Acm	D': A	e I	ASC	704	EX			
OUTS. DE		1	1,01,1	100	E	.00.		1	1		
								+	-		
								-	-	-	
Name of Registered Waste Hauler			P Waste	Cubic Ya		Name of	Registered Landf	ill			
FPEELLOLA COP	TAGE	Haule	r ID No.	of Waste	10	Cun	nBERL	ANI) (CN	Ty
City, State	1100	10	197	Disposal	301 10011001	City, Stat			9 1		
FREEHOLD. NJ				7/1	115		WBURG	, F	A	rio .	
Completed by	Title			Sig	nature	1,40	1	ate	-	,	
PAPAL RAIMO	SFF	CE	MER		1a	ral K	aimo	111	01	15	2

Date of Notification (1)		^	Building Owner/0	Operator						
6/19/15			ICKEY	E	PARI	NERS		- 1		
Agencies Notified Type Notification		Street A		na.		D X				
EPA X Initial Amended		City, Sta	380 / ite, Zip Code	IMU	IRER	RD.				-
DOL Amendment#		6.3	FRTH	100	and A	IT 08	00	, 2		
Emergency (in justification)	cluding .		f Contact	1111	Po 7 , 1	Telephone Num	ber			-
DCA Cancellation		DA	VID K	511	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1 ^			~	~
			LITY INFORMAT	ION	7			0.000		
Name of Facility Where Abatement is Taking	Place (3)				Type of Facility (115				
Street Address					School (K-1	2) 8 (Other than K-12	١			
	-				Other (i.e. p	private & commercia		lings,	home	es,
1200 STATE.	3/80	61			etc.) Square Feet	# of Floors	I B	ldg. A	ne .	
PERTH AME	Ray h	1.7			as /A	P/A		J /	1	
County (6)	71	County (Code (7)		Current Use (Pri	or if being demolish	ed)	- (.	<i>T</i>	
MIDDLESEX		(STATE I	USE ONLY)			NA				
Name of Monitoring Firm Hired by Building O	wner (8)	ASCN			of Abatement Cor	1841); 1866) 866 1866); 1866; 1866; 1866; 1866; 1866; 1866; 1866; 1866; 1866; 1866; 1866; 1866; 1866; 1866;				
Environmental Tactics		0045				S OF AMERICA	١.			
Street Address 64 Broad St					Address WHITEHEAD	AVF				
City, State, Zip Code				100000000000000000000000000000000000000	State, Zip Code					-
Matawan, NJ 07747					TH RIVER, N.	J 08882		9		
Project Manager for Monitoring Firm	1	Telepho		100000000000000000000000000000000000000	none No.	License N	٥.			
Tom Geiger		6.57	90-2217		432-8350	. 01111				
Start Date (10) 6/30/15	Scheduled Co	mpletion	Date (11)		of OSHA Monitor QUE SYSTEM	S OF AMERICA				8
Occupancy Status During Abatement (Check	Only One)	/ -			Address					
Facility Closed/Vacated During Entire Pe					WHITEHEAD A	AVE.				
Abatement Performed Outside of Normal Other – Describe: Outside of Normal Other – Describe:	I Facility Hour	S		100000000000000000000000000000000000000	State, Zip Code	1.00000				
			:	500	JTH RIVER, N	J U8882				
Scope of Work (Check All That Apply)				Г	7					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renovi Demoi				Hull Containm Mini-Enclosur	ent with Negative P e	ressu	re		
				2	Glovebag Pro		la Dra	a a d	: 0	
			Ĭ		Non-Exempte	d (*) and Non-Friab	T	Abate		
Legation of	Is Local Norma			o orie #s -	of.				pe	
Location of Asbestos-Containing Material (ACM)	Used Sole	ely by		scription taining N	n or Material (ACM)	Amount			Ш	
TO BE ABATED In Facility	Maintena Custodial			I system	s insulation,	(Specify SF or LF)	Ren	Re	nca	Encl
(13)	(12)			miscellar		Si di Erj	Remova	Repair	Encapsulate	Enclosure
	Yes No	N/A				*	=		ate	.e
aut c' N C	×		Adm N'	0.0	T.15	70 LF	Y			
OUTS: DE	-	-	ACM P	PE .	LNS.	104				
										
		-					-			
						D				
Name of Registered Waste Hauler		NJDEP W Hauler ID		Yards iste	1 6	Registered Landfill	0			
TREEHOLD CART	AGE	159	39 APF	1 / 0			BE	ERI	KS	
City, State	<u>.</u>			sal Date		te	r	1		
FREEHOLD, NJ	l =			8 D		LAS RORO,	1	H		
Completed by	Title	0 -	1.55	Signature		Da	6/	-/	1,	_
CAROL KAIMO	OFFic	E	MGR	66	cral K	amo	11	11	15	

OX-2837 State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Date of Notification (1) July 13, 2015					Name of Building Owner/ Delbarton School	Operator		Ma I	1.75
Agencies Notified	Description								
X EPA									
x DCA									
[1.1] [1.1]									
X BOTT									
Delbarton School				n K-12)					
Street Address				- 25	uildinas h	omes. e	tc.)		
230 Mendam Road									
Street Address Str	Current Use (prior if being	g demolis	ned):						
	Street Andress Stre								
300 Grand Avenue									
City State Zin Code			Street Address Stre						
	Street Andress Str								
Project Manager for Monitoring F									
Stephen Jaraczewski									
Scheduled Start Date (10)									
July 30, 2015									
Occupancy Status During Ahat									
	pancy Status During Abatement (Check only one) x Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Other – Describe:		City, State, Zip Code						
Other Describe.			Piscataway, NJ 08	854					
Source of Work (Check all that ar	(ylag							4idla NI	anativa Draggues
> 3 ef or > 3 lf				Renovation				t With IN	egative Flessule
250-31						62151114111 <u>2</u>		ure	
	1A) and No	
	7,525,535,555,655,65					38,8523		Abate	ement Type
waterial (AGW) in Facility (15)	Staff	? (12)	ustodiai				The state of the s	Remo	ve Repair Encap Enclose
D # 000 000 004	YES		NA	Dississ Calli		70	005	lo1	
Room # 222,223,224						1.0		724.00	
				VAI & Wasti	C	"	0.01		
		741010 101111111111111111111111111111111		ID#		verses			
			7/				100000000000000000000000000000000000000	dowfil	
		ment Con	sultani	ts, Inc. – Butle	er, NJ 07405	-		5	Route 2, Box 68
		c. – Newarl	, NJ 04	1509, NJ DEP #	19551		9,5		
Scheduled Start Date (10) July 30, 2015 Scheduled Completion Date (11) August 7, 2015 August 7, 2015 Cocupancy Status During Abatement (Check only one) X Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Other - Describe Other - Describe									
Completed by (Print or Type)	Delbarton School Delbarton S								





CK 4970

Date of Notification (1) 7/13/15					Building C sarnas P				01.		.1111	1 6		i F		
Agencies Notified	Type Notification		1 67	Street Ac 39 Wes	idress st Mohav	wk Dri	ve				000					
EPA DEP DOL	Initial Amended Amendment				te, Zip Coo gg Harb		08087	%				11				
▼ DOH DCA	Emergency (justification) Cancellation		- 25	Name of Paul	Contact					Tele	ephone N	lumber				
				FACIL	ITY INFO	RMATI	ON									
Name of Facility Where Paul Tsarnas Priva		g Place (3)			6:				of Facility (4 school (K-1) subchapter	2)	or than V	12)				
Street Address 39 West Mohawk D	Drive							× C e	ther (i.e. p tc.)	rivate 8	comme	rcial bu				s,
City (5) Little Egg Harbor N	IJ 08087							1000		1	Floors		35	lg. Aq +	ge	
County (6) Ocean				County C	Code (7) JSE ONLY)			Currer	nt Use (Prid e	or if bei	ng demol	lished)	1			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	No.		100000000000000000000000000000000000000	of Abat	ement Con C.	tractor	(9)					
Street Address							100000000000000000000000000000000000000	Addres 30x 32								
City, State, Zip Code								State, Zip t Berlir	p Code n NJ 080	91				9		
Project Manager for Mo	nitoring Firm			Telepho	ne No.			none No 753-98			License					
Start Date (10) 7/14/15		Scheduled 7/16/15	I Con	pletion l	Date (11)		Name Sam		A Monitor							
Occupancy Status Durin	ng Abatement (Che	ck Only One)				Street	Addres	S							
	cated During Entire ned Outside of Norr						City, S	State, Zi	p Code				_			
Scope of Work (Check							L							- 3-011		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Ан тпас Арріу)		enova emolit		10			Min Glo	Containme i-Enclosure vebag Prod n-Exempted	e cedure					•	
		le l	ocati	on										Abate	ment	
Location Asbestos-Containin TO BE Af In Fac (13	g Material (ACM) BATED cility	No Used	ormal Sole ntenar	ly ly by nce/		tos Con therma surfa		Material ns insula AT, or		(5	mount Specify F or LF)	To the second se	Demova	Ty Repair	e Encapsulate	Enclosure
		Yes	No	N/A											te	
Exterior	Siding			Х		Exte	erior Si	iding		6	00 SF	х				
		-		-								-	-			
-		-	W + 441	-									7		-	
Name of Registered Wa	aste Hauler		11100	JDEP V			Yards		Name of	Regist	ered Land	dfill				
United Containers			1338.9	lauler ID 2459	No.	of Wa			G.R.O.							
City, State Elm NJ	9					7/16/	sal Date /15	e 	City, Stat Morrisv		A 1906	7			22-	
Completed by Anthony T Perna		Title Presid	dent			1	Signatur	re/			_	Date 7/13	/15			

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)			Name o	f Building	Owner/Op	perator (2	ANIL	MACCIA	2	6		
Agencies Notified Type Noti	fication	18						TER.				
EPA Initia	nded		City, Sta	ate, Zip Co				GE, NI		7/	75.	2.
Eme	ndment # rgency (including	- -	Name o	f Contact,				Telephone N				
	cation) ellation	A	INNA	MARI	eLu		NO			-1 	. 1	
Name of Facility Where Abatement			FACI	LITY INFO	DRMATIC		Гуре of Facility	(4)				
MACCIE ESTA	TE .						School (K-		12\			
23 COLLAMOR	E TER							r 8 (Other than K- orivate & commer		ldings	, hom	es,
City (5) WEST ORA							Square Feet	# of Floors		Bldg. 1		
County (6)	. 4/C			Code (7)			Current Use (Pri	or if being demoli				
Name of Monitoring Firm Hired by B	uilding Owner (8)		ASCN			Name of	RESTO Abatement Con	ntractor (0)				
						NDIA	RI ARKO V	W INDUST	RIE	35	COL	P.
Street Address					1	Street A	ddress MILL St	T.				
City, State, Zip Code						City, Sta	te, Zip Code	7,0750	/			
Project Manager for Monitoring Firm		Τ.	Telepho	ne No.		Talanha	no Nio	licanca	No.			
Start Date (10)	Scheduled	Com	nletion	Date (11)		Manne of	SSS6S2 OSHA Monitor					
Start Date (10) 07/22/15	0.	8/2	22/1			INDI	AN ARR	ON INDU	SIR	185	a	ORP.
Occupancy Status During Abatemen Facility Closed/Vacated During						Street A	ddress Y/LL ST.					
Facility Closed/Vacated During Abatement Performed Outside Other – Describe:			ent		-	City Sta	te Zin Code	102001				
Scope of Work (Check All That Apply	γ)				_	PHIE	KSUN, N	7,07501				
≥3 sf or ≥3 lf	☑ Re	novat				H		ent with Negative	Pressu	ıre		
≥160 sf or ≥260 lf	∐ De	moliti	on				Mini-Enclosure Glovebag Pro	cedure	shie Dea			
	ls I	ocatio	on.				Non-Exemple	d (*) and Non-Fria	ible Pro	Abat	ement	t
Location of	No	rmall	у			cription o			-	T:	уре	
Asbestos-Containing Material (A	CM) Main	tenan	ce/		thermal s	ystems i	terial (ACM) nsulation,	Amount (Specify	Re	R	Enca	Enc
In Facility (13)	1	(12)				ng, VAT, scellaned		SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								fe	
BASEMENT		<u> </u>		T	-51			40 LF	-	1_		
									+-	-		
									+		-	
Name of Registered Waste Hauler	<u> </u>	100000	IDEP Wauler ID		Cubic Y		Name of	Registered Landf	ill			-
ATLANTIC CARTI	NG	2	608	35	TB	7		R.O.W.	S.			
City, State WAYNE, NO Completed by GORAN GEV					Disposa 7/37	Ð	City, Stat	e LYTOWN	P	9		
Completed by	Title SEC	N.	TAK	V	Sig	nature	AL.		ate 0-7/	10/	15	-
90/2//	1000	,	/	1			-cun-		200	-		

State of New Jersey NOTIFICATION ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)			Name	of Duildie	ng Owner/Operator	. (2)					
7/10/2015	_				drickson	(4)	JUL 1	7	TAPE .		
Agencies Notified Type Notif	ication			t Address							
EPA Initial Amend	ad			5 Irving							_
☑ DOLAmend	ment #	_	E 500 200 500 500 500 500 500 500 500 500	State, Zip nsauken,							
□ Emerge □ justific	ency (includin aton)	g		ne of Cor			Telephone Num	her			_
DCA Cancell				-Jo Gipe			I releasione ivali				
					FORMATION						_
Name of Facility Where Abatement is	Taking Place	e (3)				Type of Facilit	1000000				
Residence Shed	9.03	7/87/4				School (K-		٥١			
Street Address							 8 (Other than K-1 private 8 commerci 		Idinas	S.	
6145 Irving Avenue						homes, etc			Bldg.		
Pennsauken, NJ						80 SF	1	1000	5 Yı		
County (6)			Cou	nty Code	(7) (STATE	Current Use (F	rior if being demoli	- -			
Name of Monitoring Firm Hired by Bu	ildina Owner	_	ASCM		Name of Abaten	nent Contractor (9)	_			_
(8)			, toolvi	. 10.	AEi2, LLC						
Street Address					Street Address						
					300 S. Lenola	ARIONALISADA					
City, State, Zip Code					City, State, Zi Maple Shade,	UNION AND MUNICIPAL (1997)					
Project Manager for Monitoring F	irm	Tel	ephone	No.	Telephone No.		License No.				_
					609-481-212	22	00689				
Start Date (10)	Scheduled C	omple	tion Da	ate (11)	Name of OSHA	Monitor					
2/21/15	2/25/15				AEi2, LLC						_
Occupancy Status During Abatemen Facility Closed/Vacated During E		250	tement		Street Address 300 Lenola I						
Abatement Performed Outside of					City, State, Zip C						
Other - Describe:		5			Maple Shade	e, NJ 08052					
Scope of Work (Check all that apply)					Full Co	ntainment with N	legative Pressure				
≥3 sf or ≥3 lf	☐ Re	enovat	ion		Mini-En						
≥160 sf or ≥260 lf	\boxtimes De	emolitio	on		☐ Gloveba	ag Procedure cempted (*) and N	Non-Friable Proced	ure			
		ocati			The state of the s				Abate		
Location of	Used	ormall Sole	2		Description o	f			Ту		_
Asbestos-Containing Material (ACM	l) Mai	ntenar	ice/		tos Containing Mat	terial (ACM)	Amount	R	R	n	E n
TO BE ABATED IN Facility		Staff?		(I.e.	, thermal systems i surfacing, VAT	or	(Specify SF or LF)	m	e P	a p	1 0
(13)		(12)			other miscellane	ous)		o v a	a	s u	s u
	Yes	No	N/A					1	r	a t	E e
Exterior	100		X	Transit	e		250 sf	X		c	
								\top			
								\top			
Name of Registered Waste Hauler		1000	JDEP		Cubic Yards	Name of Reg	stered Landfill				
AEi2, LLC		1555	tauler (1 1376	J NO.	of Waste	TBD					
City, State					Disposal Date	City, State	0	-tr-v/			
Maple Shade, NJ	Teva				TBD /	TBD	/		-		
Completed By Wm. Minnick	Title Progran	n Ma	r		Signature	mus	Date 7/10/15	5			
ASB-41	_ 110gran	1 141B			MI	1111-01	./10/11				

Date of Notification (1) July 13, 2015					f Building (Service				4		JIL		ارد	į		
Agencies Notified	Type Notification		1.35	Street A 444 St	ddress t. Pauls	Avenu	e									
X DEP X DOL	Amended Amendment				ate, Zip Co / City, N.		06		to the second							
DOH DCA	Emergency justification) Cancellation		1000		f Contact y Garcy					Tel	ephone N	umber				
				FACI	LITY INFO	RMATI	ON									
Name of Facility Where Street excavation a		g Place (3)						-	of Facility (4) School (K-12							
Street Address 70 Cateret Avenue							₹//	×	Subchapter 8 Other (i.e. pri etc.)				ildir	ngs,	home	∋s,
City (5) Jersey City								Squa N/A	are Feet	# of N/A	f Floors A		Bld N/A	g. A	ge	
County (6) Hudson					Code (7) USE ONLY)	-	E i		ent Use (Prior derground p							
Name of Monitoring Firm N/A	n Hired by Building	Owner (8)		ASCN	I No.		A CONTRACTOR OF PARTY		atement Contr nt Unlimited							
Street Address							Street 4332		ess ard Avenue)						. 5-17-5-
City, State, Zip Code							400000000000000000000000000000000000000		Zip Code / 10644							
Project Manager for Mor	nitoring Firm		T	elepho	ne No.		Teleph 718	none N 994-1			License 01067	No.				
Start Date (10) July 23, 2015		Scheduled July 24, 2			Date (11)				HA Monitor nt Unlimited	d, Inc	<u>.</u>					
Occupancy Status Durin	g Abatement (Chec	k Only One)					Street	201012		11. 02.65						
Facility Closed/Vac Abatement Perform	ated During Entire I	Period of Aba	item	ent					ard Avenue	9			_			
Scope of Work (Check A	excavation area/stag	ing area isola	ation			_	The state of the s		10466							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	на так Арріу)	-	ovat noliti	21-27-110			×	Mi Gl	III Containmer ni-Enclosure ovebag Proce on-Exempted	dure				dure	4	
		Is Lo	catio	'n					71 Exempted	/ / 417	2 14011 1 110				ment	ğ.
Location	n of	Nor	mally	/		De	scription	of				_	_	Тур	oe	
Asbestos-Containing <u>TO BE AB.</u> In Facil (13)	ATED lity		enan	ce/		os Cont thermal surfa		Materia s insul (T, or		(8	mount Specify For LF)	Removal		Repair	Encapsulate	Enclosure
Street excava	ation area	165 1	40		200	friabl	~ ^ CN	1 nine	tor	2(0015	37	+	-	545	
Street excava	111011 a16a	-	10-12-1	Х	nor	1-IIIabi	e ACN	ı pipe	e tar	20	00 LF	X	+	_		
												-	+	-		/
													\dagger			
Name of Registered Was	ste Hauler		90,577	DEP W			Yards		Name of R	egiste	red Landi	fill				X.11
Veolia ES Technical	Solutions	G		uler ID 0151	No.	of Was			Wayne D	Dispo	sal Inc.					
	anders, NJ 0783					July 2	sal Date 27, 201	15	City, State Bellville,	MI 4	8111					
Completed by John Barone		Senior I	Proj	ect Ma	anager	S	ignature		Baro	M		Date 7/13/1	5			

Date of Notification (1)		N	lame	of Build	ding (Owner / Operator	(2)							
	7/2/2015				Demo		n					2000			
Agencies Notified T	Type Notifica	ation	107		Addres ox 42	S									
□ DEP			-		tate & Z	Zin C	ode								
⊠ DOL	☐ Initial		1000				a, NJ 07717								
⊠ DOH		gency			of Cont		, 110 01111				Telenh	one	Nu	mbe	er Te
□ DOH □ DCA		ellation	F	rank	Lurch	1					14,				
				EAC	II ITV	INIE	ORMATION					-		-	
Name of Facility Who	ere Ahateme	ent is Taking Pl	ace (3			HAL	Type of Facilit	v (4)							
Abandoned Bldg	oro 7 ibatorrio	one to running r	0) 000	')			School (K								
Street Address							Subchapt	er 8 (Other t	han K-1	12)					
861 Alexander Rd							Other (i.e			cial building	gs, hor	nes	, et	c.)	
							Square Feet	# of F	oors	В	Bldg. A	ge			
City (5)		County (6)	Co	unty C	code (7))	25000		1_			8	30		
Windsor		Mercer					Current Use (F		demoli	shed)					
				-	.,		Commercial					_	-		-
Name of Monitoring	Firm Hired b	y Building Owr	ner (8)		ASCM	/I No.									
Street Address							Alpha Environment		service	<u>es</u>		-	_		
Street Address							PO Box 829	T/2							
City, State & Zip Cod	de						City, State & Z		-						
							Trenton, NJ								
Project Manager for	Monitoring F	irm	Telep	hone	Numbe	er	Telephone Nu		8	License N					
			<u></u>				609-847-295	NAME OF TAXABLE PARTY.			012	22			
Scheduled Start Date 7/11/2015		Scheduled Cor 7/11/2015				Rug	Name of OSH EMSL Analy								
Occupancy Status D							Street Address								
		During Entire P					107 Haddon					_			
	Performed O	utside of Norm	al Hou	urs – 7	7am to	3pm	City, State & Z								
Describe: Facility Occu	iniad During	Abatamant					Westmont, I	NJ 08108							
Scope of Work (Che															
Coope of Work (one	on all triat ap	ppiy)					2	Full C	ontainn	nent with N	legativ	e P	ress	sure	
≥3 sf or ≥3 lf				Ren	ovation	ı		Mini-E	nclosu	re					
≥160 sf ≥260) If		\boxtimes	Den	nolition			Glove	Bag Pr	rocedures					
1000000								⊠ Non-E	xempte	ed and Nor	n-Friab	le F	roc	edu	ге
	cation of			Locati			Description			Amount	Al	oate	eme	nt T	ype
	os-Containin	g		nally l			Asbestos-Cont			(Specify SF or LF)		T		ш	
	erial (ACM) E ABATED			olely b tenan			Material (AC (i.e., thermal sy			or or Lr)	2	7	R	Encapsulate	Enclsoure
	Facility		100000000000000000000000000000000000000	odial S		i	nsulation, surfac				Remova		Repair	psu	dso
	(13)			(12)			or other miscella	aneous)			l a	-	=	ilate	ure
			Yes	No	N/A						-	1	_		_
Exterior		1)	Ш	\boxtimes			Roofing		25,0	000sf			۱	Ш	Ш
Interior							VAT		25,0	00sf					
Name of Registered	Waste Haul	er			DEP W		Cubic Yards	Name of Re	gistere	d Landfill					
AL DUA ENVIDONI	BATTAL			0.000	uler ID		of Waste	Crownla	n aldill						
City, State	MENIAL			00	033330	U	4 Disposal Date	Grows La City, State	nami			-			
Oity, State															
Trenton, NJ							Various	Morrisville	e, PA						
Completed By (Print	or Type)			Titl		2015-C 19	Signature				Date				
Rod Richardson				Pr	niect		n In. I	/			712	171	146		

mo 2274856918%

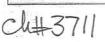
State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

Date of No 07/13/201	otification (1):				lding Ov	wner/Operator (2)		<u></u>		υÜ		5 24	115	
Agencies	Type Notification			Addre		01								
Notified	□Initial	and the same		ar Stree									/	
EPA DEP	☐ Amended Amendment#:			state, z rk, NJ (Cip Code 07102	:								
a DOL	☐ Emergency		Name	of Cor	ntact:	20		Telenhon	e Num	her:				
BDOH □DCA	(including justification) □ Cancellation		Mr. B	enjami	n Olagao	deyo		-						
						FACILITY INFO	ORMA	TION	72-					
Name of F	acility Branch l	Brook S	School	l				of Facility (4):						
228 Ridge	Street							hool (K-12) bchapter 8 (Other than K	(-12)					
City/ (5)		County	(6):		Count	y Code (7):		her (i.e., private & comn		buildings, ho	mes, e	etc.)		
Newark		Essex			07104		Squa	are Feet:		# of Floor	s:			
								g. Age rent Use : School						
	Monitoring Firm			ilding	Owner:	ASCM No.:		ne of Abatement Cont	ractor	(9):				
TTI ENV	TRONMENTAL	L, INC.				0003	Ape	ex Development, In	ıc.					
Street Add								et Address:						
1253 No	rth Church Str	eet					658	Rutgers Place						
City, State	e, Zip Code:						City	, State, Zip Code:						
Mooresto	own, NJ 08057	7					Par	amus, NJ 07652						
	anager for Mon	itoring l	Firm:			Telephone No.:	Tele	phone No.:	Lic	ense No.:				
James Gu	3/07/2000/00/00		7/2-			856-840-8800		3) 350-0101	012	215				
Start Date 07/24/15	(10):		hedul 1/30/1		pletion	Date (11):		ne of OSHA Monitor: ro Analytical Laborato	ories					
Vicinity days 12%	Status During Ab							et Address: West 36 th Street, Sui	te 203					
	Closed/vacated Du nt Performed Out					t	City	, State, Zip Code: V York, New York, 10			-			
□ Other Describe:														
	ork (Check all the	at apply)):					HAME AND ARTES	33 9343			7014 BOVD		
□ ≥ 3 sf or □ ≥ 160 sf	$r \ge 3 \text{ lf}$ for $\ge 260 \text{ lf}$				☑ Reno □ Demo	vation olition		□ Mini- □ Glove	Enclo bag P	rocedure	· · · · · · · · · · · · · · · · · · ·			
			Is	Locat	ion			□ Non-E	xempt	ed (*) and N	on-Fr		emen	
	Location of		N	Vormal	ly	A sheetes Cont	escripti	ion of Material (ACM)				Ty	ype	
Asbestos-	Containing Mat (ACM)	terial		d Sole intena		(i.e., therma	al syste	ems insulation,			×		E	H
ТО	BE ABATED			ustodi	al/			VAT, or llaneous)		Amount Specify	Removal	Repair	Encapsulat	Enclosure
1	IN Facility			Staff?	,	Other	misce	nancous)		F or LF)	ova	oair	lusc	nusc
	(13)		Yes	No No	N/A								at	G
BOILER	ROOM			X		BOILER INSU	JLATI	ON (2 BOILER)	60	0 SF	*			
BOILER	ROOM			X		BOILER BREI	ECH	E.	30	0 LF	*			
BOILER	RROOM			X		PIPE INSULAT	TION		18	0 LF	*			
									1					
	Registered Wast TE TRANSFER			IC.	NJDE	P Waste Hauler ID	No.:	Cubic Yards of Waste: 30	MI	me of Regis NERVA SOC, INC.	stered		ll: ERPR	ISES
City, State Bronx, NY				Dispo	osal Date	e:		City, State: Waynesburg, OH 4						
Completed	d By:				Title:		Signa			Date:	Bot both			
Sylvester	Oraegbunam				Presid	lent	9	Lanks		07/13/20	15			

Date of Notification (1) 07/07/2015							Operator (2) HTWEISZ			<u> </u>					
Agencies Notified	Type Notification			Street A	ddress MAIN	ST.				JUL	6	_!!	-		
EPA X DEP X DOL	Initial Amended Amendment #				ate, Zip Co ENSAC		07601						ų.		
DOH DCA	Emergency (in justification) Cancellation	ncluding			f Contact OANNE	LEICH	HTWEISZ	×	Tel	ephone t	Numbe				
N				FACI	LITY INFO	DRMAT									
Name of Facility Where A PRIVATE	Abatement is Taking	Place (3	3)				Тур	e of Facility (
Street Address								School (K-1 Subchapter		er than K	(-12)				
149 S. MAIN ST.							×	Other (i.e. petc.)	orivate o	& comme	ercial b	uild	lings,	home	es,
City (5) HACKENSACK NJ.	. 07601							uare Feet 200		f Floors STORIE	ES	В	idg. A	-	
County (6) BERGEN	2				Code (7) USE ONLY)	Cui	rrent Use (Pri N	or if bei	ing demo	lished)			
Name of Monitoring Firm N/A	Hired by Building O	wner (8)		ASCN	/I No.			batement Cor N QUALIT			CTIC	N	LLC		
Street Address							Street Add	ress ORDEN P	 L.						
City, State, Zip Code							City, State,	Zip Code NSACK NJ	. 0760)1			fe		
Project Manager for Mon	itoring Firm	s: ::*		Telepho	ne No.		Tc_vnone 201- 708			License 01135					
Start Date (10) 07/17/15		Schedule 07/20/		mpletion	Date (11)			SHA Monitor		SERVI	CES				
Occupancy Status During	g Abatement (Check	Only Or	ne)	-			Street Add								
Facility Closed/Vac	ated During Entire Po	eriod of	Abate	ment			2333 RT	. 22 W							
Abatement Perform Other – Describe:	ed Outside of Norma	al Facility	/ Hour	'S		<u></u>	City, State, UNION I	Zip Code NJ. 07083					1.2.2.3		
Scope of Work (Check A	Il That Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demoli				×	ull Containm Ini-Enclosure Blovebag Pro	e cedure						
		Π.	v. 1999		1			lon-Exempte	d (*) an	d Non-Fr	riable I		2011/02/01 11/8	e ement	
Location	of	100	Loca			Do	scription of							ре	
Asbestos-Containing	Material (ACM)	8 6 19	d Sole	ely by	Asbes	tos Con	taining Mater	ial (ACM)		mount				ш	_
TO BE ABA		0.000	todial	Staff?	(i.e.		systems inscing, VAT, or			Specify F or LF)		Remova	Repair	псар	nclo
(13)			(12)	_		other r	niscellaneous	s)		122		oval	bair	Encapsulate	Enclosure
		Yes	No	N/A										Ф	
BASEM			Х				FLOOR B	1		00 SF.	2	K			
GARA			Х				9X9 BRO			00 SF	2	2			
CEILING TILEING T			Х			PIPE I	NSULATIO	ON	-	85 ft	2	ζ.			
First Floor (Sma			X				OLEUM			5 SF.		2			
Name of Registered Was TRI. STATE ASSOC			1000	NJDEP W Hauler ID	1000	Cubic of Wa	Yards ste	Name of							
	, . ING		1	991		TBD		MINER		VIERP	KISE	. 11	VC.		
City, State BRONX, NY	*				12	Dispo:	sal Date	City, Stat		RG. OI	OIH				
Completed by		Title					ignature	1	001	2_	Date	_			
CARLOS ESQUIVE	_	MAN	AGE	R			J.IE	enthy	19	9	07/0	7/2	015		



Date of Notification (1) 07/13/2015					f Building Iair Boa					JU	JL :	5	2015		
Agencies Notified	Type Notification			Street A	ddress ley Roa	d	1								
EPA X DEP X DOL	Initial Amended Amendment	#			ite, Zip Co lair,NJ C			-							
X DOH	Emergency justification) Cancellation			Name of	f Contact Sapona					Telephon	e Nur	nber		10-120	
	1—			FACI	LITY INFO	ORMAT	ION								
Name of Facility Where Northeast School	Abatement is Takir	g Place (3))						of Facility (4 School (K-1)	88.53					
Street Address 603 Grove Street				Λ					Subchapter	8 (Other that rivate & com			dings.	hom	es,
City (5) Montclair								Squar	re Feet	# of Floor	'S	E	ldg. A	Age	
County (6) Essex					Code (7) USE ONLY)		Curre		or if being de	molish	ied)			
Name of Monitoring Firm Detail Associates, I		Owner (8)		ASCN	A No.				tement Con oration	tractor (9)					
Street Address 300 Grand Ave	<u> </u>						Street 606 N		ss de Ave						
City, State, Zip Code Englewood, NJ 076	531								p Code Park, NJ	07424					
Project Manager for Mor Stephen Jaraczews				Telepho 201-56	ne No. 69-6708		Teleph		o.		nse N	0.			
Start Date (10) 07/24/2015		Schedule		npletion	Date (11)		Name	of OSH	A Monitor	Laborator	ies				
Occupancy Status Durin	ig Abatement (Che	k Only On	e)				Street								
X Facility Closed/Vac	cated During Entire ned Outside of Norr	Period of A	baten						e 22 Wes	st		5000000			
Other - Describe:		nai Facility	nours				P. (2)		p Code 07083						
Scope of Work (Check A	All That Apply)	X R	enova	tion			×]	Containme	ent with Nega	tivo D	roon			
2160 sf or ≥260 lf		Name and Address of the Parket	emolit					Min Glo	i-Enclosure vebag Proc	edure					
		T						I Nor	n-Exempted	(*) and Non-	-Friab	le Pro		e emen	+
Location	n of	N	Locati ormal	ly		De	escription	of					-	pe	
Asbestos-Containing TO BE AB			d Sole			tos Con	taining M	aterial		Amoun		_		Ш	m
In Faci	lity	Custo		Staff?	(I.e.		I systems icing, VA		tion,	(Specify SF or LF		Removal	Repair	ісар	nde
(13)		-	(12)	_		other i	miscellan	eous)	1			oval	air	Encapsulate	Enclosure
		Yes	No	N/A										е	
room	21	-		X		radiat	or insul	ation		48 sf		х			
		-										_			
		-	-	-								-			
Name of Registered Was	ste Hauler		TN	JDEP W	/aste	Cubic	Yards		Name of F	Registered La	andfill				
Lilich Corporation			H	auler ID 3724		of Wa			whi was an	V.S. Landi					
City, State Woodland Park, Nev	w Jersey					Dispo n/a	sal Date		City, State Morrisvi						
Completed by Momo Glavatovic		Title	rocia	lont			Signature	1	1	_	Da		2015		
INIOTHO GIAVALOVIC		vice p	USIC	IGIII			(9	V	<u> </u>	07	/13/2	2015		

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				(೭೮೮೮೩)	ALM of th	C 8:80 ar	nd 12:12	(0)	D	OL - 10	DAY	Ç	70	7
Date of Notification (1) 07/09/2015				Name	of Bulldin	g Owner/	Operato	r (2)			22111	=/	-	
				Mont	idair Bo	ard of E	ducati	no			Λ	1	1	
Agencies Notified T	pe Notificatio	n			Address					}\!\. ! -!-	*/13	1	-	
EPA X	Initial				alley Ro									
N DEP	Amended Amendmer	-1 4		City, S	tale, Zip (Code		1	1					
	Emergency	(includin	0	t	clair, N.			- 1	WAIV	/ER APP	PROV			
DOH DCA	just:fication Cancellatio	1)		1 8 8	of Contac	•				Telephone		p= 12.7	-	
					y Sapor									
Name of Facility Where Aba	emani is Taki	ng Place	(9) 1	FA	CILITY IN	FORMAT	ION	TUE	e of Fecility (4	0				
Mt. Hebron school				i ·										
Street Address			. !!	i,					School (K-12 Subchapter	8 (Other than	K-121			
173 Bellevus Ave			1						Other (i.e. pr	rivate & comm	nercial bu	اومالهالد	s, hon	nes.
City (5) Montclair			1	i.				Sou	etc.) are Feet	# of Floors				
			1	3		8		-		- 51110018		Bløg.	∪Å8	
County (8) Essex			1 3	County	Code (7)			Curr	rent Usa (Prio	t if being dem	olishad			
	45.6			1	USE ONL	7)					/			
Name of Monitoring Firm Him Detail Associates	ed by Building	Owner (8)]	ASC	M No.		Nama	of Ab	atement Cont	ractor (9)				_
Street Address							Lilich	Cor	poration	50000011505				
300 Grand Ave	9		1			415	Street						-	
City, State, Zip Code				1.5					ride Ave					
Englewood, NJ 07631							Wood	iste, 2	Zip Code d Park, NJ	07404				
roject Manager for Monitorin	g Firm			Telepho	one No.		Talaph							
Stephen Jaraczewski		3			69-6708	3	973-2			Ulcens 0110			12	
Start Date (10)		Schedu	ad Co	mpletion	Date (11)				HA Monitor	0110	7			
07/10/2015		07/11/	2015	5			J&S	Envir	ronmental I	_abs				
Occupancy Status During Ab	30		1000				Streat	Addre	48					
Facility Closed/Vacated	During Entire	Period of	Abate	ment			2333	Rou	te 22 West	la.				
Atatement Performed O Other - Describs:	utside of Norn	ns. Facilit	y Hou	75					Lip Code			_		-
cape of Work (Check All The	(Aprille)						Union	n, NJ	07083					
	LI APPIY)	[75]												
23 sfor ≥3 if ≥160 sfor ≥260 (f			Renov Iomel				H	Fu	i) Containmen	it with Negativ	re Press	ure		
in inter-construction in the second s		<u></u>		.CON				Mir Gir	ni-Enclosure ovebao Proce	dure				
					···		×	No	n-Exempted ((*) and Non-Fi	riable Pro	ocedu	rê .	0000000
¥70.722.¥2032.7032			Loca									Abst	emen	t
Asbestos-Containing Mate	rial (ACM)	Use	d Sole	ely by		Des	cription o	of			-	T)	/ps	
IO BE ABATED		Me	Intens	nce/ Staff?	/i.e	tos Conta	sining Ma	ineuts Ineuts	(ACM)	Amount	1_		0	_
In Facility (13)		Cus	(12)			surfac	ing, VAT	. or		(Specify SF or LF)	ten	Repair	Kap	9
110/		-		_	1	other m	iscellana	POUS)		2000 1550 1550 1550 1550 1550 1550 1550	Remova	Pai.	Encapsulate	Endoswe
200000 221		Yes	No	N/A							-		Ř	6
rooms 20A,21,	23			X	m	astic fro	m ceill	ng til	es	17sf	×	1		
						+		- CONT.		10.00000	-	1		
											-	-		
				1										
	limit		-1 k	JOEP W	aria	Cur's 1	(made							
me of Registered Weste He				aular ID		Cubic Y				gistered Land				
	Jan 23		1			n/a	_		G.R.D.W.	S.,Landfill				
ch Corporation				8724		11/4		19		0.1201101111				
ich Corporation ty, State				8724		Disposa	I Date		City, State					
ich Corporation ity, State codiand Park,NJ				8724			l Date							
eme of Registered Waste Halish Corporation ity, State codiand Park, NJ completed by como Glavatovic		Tifle vice p	11			Dispose n/a	al Date	đ	Olly, State Morrisville	B,PA	Date 07/9/15			_

ASB-41 (R-08-08)

[.] Do not use this form for aspectos licensure exempted activities.

CHECK # 1221

Date of Notification (1) 07/13/2015					Name of Building Owner/Operator (2) Robert & Marilyn Richardson											
Agencies Notified Ty	rpe Notification			Street A	ddress chard St	root										
X EPA X DEP DOL	Initial Amended Amendment	#		City, Sta	ite, Zip Co town NJ	de					1					
∑ DOH □ DCA □	Emergency (justification) Cancellation	including			f Contact t Richar	dson		Telephone Number								
Name of Facility Where Abat	tomont is Taking	Diane (3)		FACI	LITY INFO	DRMATI	ON	Type of Facility (4)								
Private Residence	10					Type of Facility (4) School (K-12)										
Street Address 15 Orchard Street						Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)										
City (5) Morristown			-20						uare Feet 900 +	# o	f Floors	- 1	Bldg. Age 50+			
County (6) Morris County			Code (7) USE ONLY				rrent Use (Prio			hed)						
Name of Monitoring Firm Hire	ed by Building (Owner (8)		ASCN	No.			e of Abatement Contractor (9) corn Contracting Corp.								
Street Address								et Address Route 46								
City, State, Zip Code						, State, Zip Code cowa NJ 07512										
Project Manager for Monitoria		Telepho	ne No.		Teleph 973-		No. -9176		License N 01232	lo.						
Start Date (10) 07/25/2015		Schedule 07/25/2							SHA Monitor sion Consul	tants	Inc.					
Occupancy Status During Ab	atement (Check	only On	e)				Street			Pla	la 25E					
Facility Closed/Vacated Abatement Performed C Other – Describe: Norm	Dutside of Norm	al Facility	batem Hours	ent			City, S	state,	agaraw Rd. Zip Code rn, NJ 0741		ig.55L					
Scope of Work (Check All Th							ган	Law	11, 145 0741	U					- 1929-1	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoliti	ration lition					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
		la la						_ N	ion-Exemplea	() and	J NON-FIIAL	T PIO	2000 W	emen	t	
Location of		N	Locati ormall	ly		Des	scription	tion of					Тур			
Asbestos-Containing Mat <u>TO BE ABATEI</u> In Facility (13)		Mai	d Sole ntenar odial S (12)	nce/		tos Cont thermal surfac		Materi s insu T, or		(S	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A					34					6		
Basement				х		Pipe	Insula	tion		.10	60LF	X				
									-			-				
								_				-				
Name of Registered Waste H	10.77.57	JDEP W		Cubic			Name of F	Registe	red Landfil							
Unicorn Contracting Cor	100000	auler ID 035844		of Was	ste		G.R.O.V	V.S.,	Inc.							
City, State Totowa NJ 07512			-			Dispos TBD	sal Date	7	City, State Morrisvil		ennsylva	nia				
Completed by Dimo Golcev	ct Ma	nager		S	ignature		15,	/	10	ite 7/13/2	2015					



Date of Notification (1) 7/10/2015 Che		Name of Building Owner/Operator (2) Bergen Catholic H. S.															
Agencies Notified	Type Notification			Street Ad 1040 C	ddress Oradell A	venu	e										
DEP DOL	Initial Amended Amendment				te, Zip Co I, NJ 07												
DOH DCA	Emergency justification) Cancellation			Name of Danny	Contact			Telephone Number									
				FACII	LITY INFO	DRMAT	ION										
Name of Facility Where Bergen Catholic Hi				1701		21 (1812)	ION	Type of Facility (4)									
	gii ociiooi-bolle	I KOOIII						School (K-12)									
Street Address 1040 Oradell Aven	ue						Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)										
City (5) Oradell, NJ						So	quare Feet	# 0	f Floors		Bldg. Age						
County (6) BERGEN		County C	Code (7) ISE ONLY)				urrent Use (Prior chool	if bei	ng demoli	ished)						
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.				Abatement Contr vices Corpora								
Street Address							Street	Ad	dress	20011			-				
City, State, Zip Code					-50-53 (4.47-44		City, S	State, Zip Code									
Project Manager for Mor	nitorina Firm			Telephor	ne No		Gutte		perg, NJ 0709	3	License	No					
							201-	29	5-1700		01074	140.					
Start Date (10) July 22, 2015		Scheduled July 25-2							OSHA Monitor vices Corpora	ation				٠			
Occupancy Status Durin	g Abatement (Ched	k Only One)					Street	Ad	dress								
Facility Closed/Vac Abatement Perform	ated During Entire	Period of Ab	atem	ent					s above								
Other - Describe:	Starting 7 AM-3:30 I	PM	lours				City, S	olali	e, Zip Code								
Scope of Work (Check A	All That Apply)	I⊽I Po		tion			>	K	Full Containment		. NI 45	D					
23 st of ≥3 ft ≥3 ft ≥160 sf or ≥260 lf			nova					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
		1	23.00				L		Non-Exempted	(*) an	d Non-Fria	able F			ure atement		
1	6	100000000000000000000000000000000000000	ocati rmall	55.000		-									ement pe		
Location Asbestos-Containing		Used			Asbes		escriptior ntaining N		erial (ACM)	А	mount				m		
TO BE AB		Maint Custor				therma	al system	s in	sulation,		Specify		Re	Z,	nca	Enc	
In Faci			(12)				acing, VA miscellar			Sh	or LF)	1	Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A								1	<u> </u>	7	late	ire	
Boiler Room-E	Boiler #1-H			х	Boil	er bre	aching	ins	sulation	(6 SF	x					
								-5-2									
		,															
Name of Registered Wa	ste Hauler		N	JDEP W	aste	Cubi	c Yards		Name of Re	eaiste	ered Landi	fill					
Freehold Carting Inc			Н	auler ID	of Wa			GROWS									
City, State Freehold, NJ						Dispo	osal Date	sal Date City, State Morrisville, PA									
Completed by					T	Signature	e /	D) 1		1	Date						
Gina Salvador										Duas - 7/10/2015							

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1) 7/10/2015 Che		Name of Building Owner/Operator (2) Marist High School																		
Agencies Notified EPA	Type Notification X Initial			Street A 1241 J	ddress John F K	enne	edy													
DEP DOL	Amended Amendment		_ [7.5	te, Zip Co ne, NJ C		2													
DOH DCA	Emergency justification) Cancellation	100		Name of Contact Mr Mark Lenzo Telephone Number																
_				FACILITY INFORMATION												_				
Name of Facility Where Marist High School							Type of Facility (4)													
Street Address 1241 John F Kenne		School (K-12) Subchapter 8 (Other than K-12 Other (i.e. private & commercia etc.)																		
City (5) Bayonne, NJ 07003	2							Squa 28,0	are Feet	# 0	f Floors		505	ldg. A	ge					
County (6) HUDSON		County (Code (7) JSE ONLY)				ent Use (Prior	if be	ing dem	olishe	d)									
Name of Monitoring Firm Omega Environme		Owner (8)		ASCN	No.				atement Cont											
Street Address 280 Hyuler Street							Street 426		ess Street											
City, State, Zip Code Hackensack, NJ 07					500000000000000000000000000000000000000	y, State, Zip Code uttenberg, NJ 07093														
Project Manager for Mon		Telepho			Teleph	none N			Licens 0107											
Start Date (10)				Completion Date (11) Name					SHA Monitor			4								
July 24, 2015		July 29-							ces Corpora	ation										
Occupancy Status Durin							Street													
X Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire I ned Outside of Norm Starting -3:00 PM	Period of Al nal Facility	oaten Hours	nent			300000000000000000000000000000000000000		above Zip Code						-					
Scope of Work (Check A	All That Apply)																			
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	ы тыс другу	-	enova emolit				2	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure												
		le l	ocati	ion						ipted () and reon-				Abatement						
Locatio	n of	N	ormal	ly		Г	escription	intion of						Ту	ре					
Asbestos-Containing TO BE AB In Faci (13)	n Material (ACM) NATED lity	Used Mair Custo	itena	nce/		tos Co therm sur	ntaining N al system facing, VA	ng Material (ACM) tems insulation, VAT, or			mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure				
(13)		Yes	No	N/A		otnei	miscellar	neous)				val	Ŧ	ulate	ure				
Room 127-F	irst Floor		Х			Pop	o-corn c	eiling		2	22 SF			х						
		+++										-								
10																				
Name of Registered Wa	ste Hauler	N	JDEP W	/aste	Cub	ic Yards		Name of R	egist	ered Lar	ndfill									
Freehold Carting Inc		lauler ID 5939	No.	tbd	/aste		GROWS		th Lan	dfill										
City, State Freehold, NJ	· ·					Disp tbd	osal Date	Date City, State Morrisville. PA												
Completed by Gina Salvador								Signature Date												
Oli la Galvauul	Office Manager								(Plua) 7/10/2015											

111111 0111



Date of Notification (1) July 10, 2015		Name of Building Owner/Operator (2) PATH Harrison Station / Port Authority													
Agencies Notified Type Notification X EPA X Initial	111252		Street A	ddress ie Stree	t Room	1 236			_		-				
EPA Initial Amended Amendment:		_	Jersey	te, Zip Co City, N)		1	-						
DOH justification) DCA Cancellation			U. Mel				nmental Field		enhone Nu	mher					
Name of Facility Where Abatement is Taking PATH Harrison Station	Place (3)		FACI	LITY INFO	DRMATIC	N	Type of Facility (4)								
Street Address 1000 Frank E Rodgers Blvd S		School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)													
City (5) Harrison NJ	Ø		Square Feet	# 0	f Floors	E	Bldg. A	ge							
County (6) Hudson County			County C	Code (7) JSE ONLY)		_	Current Use (Pr	rior if be	ng demolis	hed)					
Name of Monitoring Firm Hired by Building C Weston Solutions	wner (8)		ASCM 0013				ne of Abatement Contractor (9) amercy Group, Inc.								
Street Address 205 Campus Drive							Address Burns Ave.								
City, State, Zip Code Edison, New Jersey 08837							, State, Zip Code antagh, NY 11793								
Project Manager for Monitoring Firm		Telephor 732-41	ne No. 7-5800			one No. 376-0020		License N 01085	lo.						
Start Date (10) 7-28-15	Scheduled 12-31-1		npletion [Date (11)			of OSHA Monitor	į.							
Occupancy Status During Abatement (Check	(5)	58					Address Burns Avenu	Δ.							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:						City, S	tate, Zip Code tagh NY 1179								
Scope of Work (Check All That Apply)						Train									
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	-	enova emolit				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	ls I	ocati	on				Non-Exempte	ed (*) an	a Non-Friat	Die Pro	Abate				
Location of	No	ormal Sole	ly			cription		400		Туре					
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		itenar	nce/		thermal s	systems ing, VA		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure		
Cut lines on Ctool bearing	Yes	No	N/A	101	4 D		11		-10 5	Х		CD .			
Cut lines on Steel beams		X		ACN	/ Paint	on ste	el beams	3,	3,510 sf						
Name of Registered Waste Hauler		JDEP Wa		Cubic Y				red Landfil							
Horwith Trucking	(35550)	A-263					_/	Services							
City, State 1449 Nor Bath Road					Disposa	al Date	City, Sta 876 Ot		ek Rd						
Completed by Robert Lewin	nme	ntal Co	ordinato	or Sig	gnature)X			te 10-1	5					

B & G proj. #: 2015-125

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

*** Sub chapter 8 ***

Check # 7297

Date of Notification	(1)	110	lame of Bu	ilding Own	er/Operator (2)											
10 17 1/11 13	1/11 15			- Table 1	of Education			· ·	JUL 1	3 24	15					
Agencies Notified	Type Notification	on S	treet Addre	ess	(4					-						
≭ EPA	X Initial		86 Rive	r Road								5				
☐ DEP			ity, State,	Zip Code												
X DOL	Amendm	nent	Montvil	le, NJ 07	045											
X DOH		1.1	ame of Co	ntact				Telephone	Number	300-11						
☐ DCA	Cancella	ition	James	T. Tevis									_			
				FAC	LITY INFORM	ATION										
Name of facility wh	here abatement is	s taking pla	ace (3)					Type of Facility (4								
Valley View E	lementary Sc	hool							(K - 12)	hor th	on K	12)				
Street Address								50.00	pter 8 (Oti Private/Co			12)				
30 Montgome	ery Avenue							Bldgs./h	Homes, etc	3.						
			. 785					Square Feet	# of Floors		BIC	lg. Ag	ge			
City (5)		Cou	nty (6)				nty Code (7) e use only)	Current Lies (Prior if heins demolished)								
Montville, NJ	J 07045	Mo	orris			,	,,	Current Use (Prior if being demolished) Elementary School								
Name of Monitorin	ng Firm Hired by I	Bldg. Own	er (8)		ASCM No.		Name of Abatement	Contractor (9)	<u> </u>							
EnviroVision					00079		B & G Restorati	on, Inc.								
Street Address							Street Address	2004								
A CONTRACTOR OF THE PARTY OF TH	araw Road, Bu	uilding 3	5E				105 Ryerson R	.0au		*						
City, State, Zip Coo Fair Lawn, N	de NJ 07410						City, State, Zip Code Lincoln Park, I	NJ 07035								
Project Manager fo		1	IP	hone Numb	er		Telephone Number		License I	Numb	er					
Willie Morale				973-636-	9145		(973)696-686	9	003	378						
Scheduled Start Da	755-77-7	Sche	d. Complet	ion Date (1	1)		Name of OSHA Moni									
07/27/2015	, , , ,	08/	01/2015			- 11	B & G Restorat Street Address	ion, inc.					-			
Occupancy Status	During Abatemer	_					105 Ryerson R	oad								
Facility close	d/vacated during	entire per	iod of abat			11	City, State, Zip Code									
Abatement p Describe:	erformed outside	of normal	facility hou	ırs-				107005								
Other-Descr	ibe:					-	LincolnPark, N.	J 07035								
Scope of Work (cl	heck all that apply	4)						181								
Demolition	X	Renovati	on				ull Containment w/neg	gative pressure	Gloveb							
> 3 sf or $> 3 $ lf	f X	≥160 sf or	≥260 lf				fini-enclosure	L	Non-fri							
Location of	4.8		n normally enance/cu	used solel	2		285-289	Amount		e ·	R	E n	E			
asbestos-co material to b		staff(12)			Description material (sbestos-containing	(Specify S	F or	m o	p a	C	n			
abated in fac		Yes	No	N/A	l material	, ,		LF)		v e	i	a p	L			
front door botto	m of Boiler 1			X	cementito	us ma	aterial	9 SF		X						
back door of Bo	oiler 2			X	cementito			8 SF		X			님			
front door top o	of Boiler 2			X	cementito			4 SF		X	부	<u> </u>	빎			
boiler room				×	boiler bree		9	250 sf 260 lf		X		-	#			
boiler room	Hawler	1000	ED.	X	pipe insulation		Name of Registered			X	Ш	Ш,				
Registered Waste I B & G Restora	nauler ation, Inc.	NJE	EP Hauler 19563	10#	10	vasio	Tullytown	Resource & Re	covery (Cen	er					
City, State Lincoln Park,				Disposal I	Date 8/03/2015		City, State Tullytown,									
Completed by (Prin		Title		1	Signature		L		Date							
Gordana Luna			ary/Treas	urer		(Gordana Luna	07/13/2015								

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

Check # 7298

2015-126 B & G proj. #:

Date of Notification (1) Name of Building Owner/Operator (2) 10 | 7 | / | 1 | 3 | / | 1 | 5 | TD Bank Agencies Notified Type Notification Street Address ☐ EPA 732 Anderson Avenue Initial DEP City, State, Zip Code DOL Amendment Cliffside Park, NJ 07010 Telephone Number X DOH Name of Contact Cancellation ☐ DCA Thomas Messina FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) TD Bank Subchapter 8 (Other than K-12) X Other (Private/Commercial Street Address Bldgs./Homes, etc. 732 Anderson Avenue # of Floors Bldg. Age Square Feet County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) Cliffside Park Bergen Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number License Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 07/27/2015 07/29/2015 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition ☐ Full Containment w/negative pressure Glovebag procedure | Renovation Non-friable procedure X ≥160 sf or ≥260 lf Mini-enclosure >3 sf or >3 lf Is location normally used solely E Location of E е e by maintenance/custodial Amount asbestos-containing Description of asbestos-containing m n p staff(12) (Specify SF or C material to be material (ACM) C 0 a a LF) abated in facility (13) N/A Yes No p 0 VAT & Mastic 615 SF X basement brake room & hallways Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# B & G Restoration, Inc. 19563 Tullytown Resource & Recovery Center Disposal Date City, State Tullytown, PA 07/30/2015 Lincoln Park, NJ Signature Completed by (Print or Type) Title Gordana Luna 07/13/2015 Gordana Luna Secretary/Treasurer

Date of Notification (1)					Name of Building Owner/Operator (2)												
	9 /	15	_		PSE&G / Job #1506-4920 Check #7348												
Agencies Notified	Type Notific	ation			Stree	Street Address											
⊠ EPA					40	00 Hadley	y Ro	oad									
□ DOLWD	☐ Amende				City,	State, Zip (
□ DHSS	Amendm		100		So	uth Plain											
☐ DCA (NJAC 5:23-8)	☐ Emerger justificat		auding	l.	Name	e of Contac	ct	-	Telephone Number								
,	Cancella	700			An	drew Yas	ssa		receptions realised								
					FA	CILITY IN	VFO	RMATION									
Name of Facility Where A	batement is	Taking	Place	(3)		* /			Type of Facility (4)								
PSE&G Switchyard									School (K-12								
Street Address										Other than K-12		.:1-1:					
996 Klemm Ave.									homes, etc.)	rivate and comme	rciai bi	allain	gs,				
City (5)									Square Feet	# of Floors	В	dg. A	.ge				
Gloucester												9	5				
County (6)					Cou	ntv Code (7	7)/ST	ATE USE ONLY)	Current Use (Pri	or if being demolis	shed)						
GLE					100.700		710		Switchyard	o 2011.g aoo	31100)						
Name of Monitoring Firm	Hired by Buil	dina O	wner (8)	ASCM	No	Na	ame of Ahateme	ent Contractor (9)			-					
Health & Safety Ser		ung o	wilei (0)	7100101	140.	15012000	AbateTech, I									
Street Address	VICCS							reet Address				-					
PO Box 365							1000		DO Day 25	S-							
							-	30 Maple Ave									
City, State, Zip Code								ty, State, Zip Co		8							
Berlin, NJ 08009				T = .	P. D.			Lumberton, N	NJ 08048	1							
Project Manager for Monit	oring Firm				ephone			lephone No.	-	License No.							
Jim Proctor					56-452			609-265-2107		00529							
Start Date (10)	\$400-000				etion Da		1000000	me of OSHA M									
8 /13 / _		1-1000000		15.016	4_ /	/ _15 EMSL Analytical											
Occupancy Status During			11.50	7.5				reet Address						.			
☐ Facility Closed/Vacated ☐ Abatement Performed							100	200 Route 13									
Time of Abatement:																	
Scope of Work (Check all	that apply)							Jinnaminson	, NJ 08077								
D. 0. f 0. f.								☐ Full Cont	ainment with Neg	ative Pressure							
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Rei Dei Dei Dei Rei Dei Rei Rei					☐ Mini-Enc	r-Enclosure vebag Procedure								
				HOIL	011				mpted (*) and Nor	n-Friable Procedu	re						
1.5 1.5				Loca						3	Ab	Abatement 7					
Location	3.00	.		lorma	ally ely by			Description of		***********	R	R	Ш	ш			
Asbestos-Containing N TO BE ABAT		1)			ance/			Containing Matermal systems i		Amount (Specify	Remova	Repair	nca	nclo			
IN Facility			Cust		Staff?	(1.0		surfacing, VAT,		SF or LF)	val	5	Encapsulate	Enclosure			
(13)		H	Yes	(12) No	10		of	ther miscellaned	ous)				ate	ω			
Control Building						Windov	v ca	ulk		642 LF		П	П				
3						111111111111	-										
			_							98		片					
													님				
		Ш	Ц								Ш						
Name of Registered Waste		NJDEP I Hauler II		0.55	bic Yards of aste	Name of Regist											
ETGI	Ι,	S710			20	Conestoga	Landfill										
City, State					posal Date	City, State											
Flanders, NJ							8	3/14/15	Morgantown, PA								
Completed By (Print or Typ	oe)	Title		-				Signature	1/	Da	te ,	1					
Gwendolyn Trumbet	ti	Ор	eratio	ons	Coord	inator			MIX.		7/0	7/1	5				
									1001		J	11	-				

ASB-41 MAY 11

* Do not use this form for asbestos licensure exempted activities.